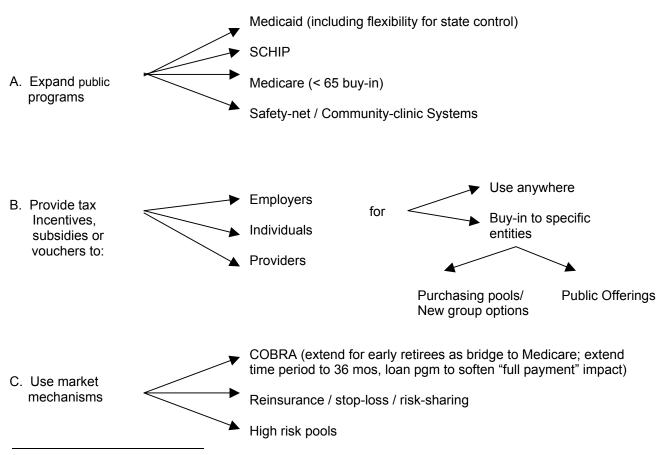
## Washington State Planning Grant on Access to Health Insurance

## COMMON CATEGORIES IN DISCUSSION (for expanding insurance coverage)<sup>1</sup>

- Maximize / expand / streamline enrollment in public programs (e.g., Medicaid waiver for flexibility; maximize SCHIP dollars -- especially use to cover parents)
- 2. Create buy-in opportunities for individuals and employers to existing options (e.g., state or federal employee programs; existing small employer purchasing pools must include premium assistance)
- 3. Create buy-in opportunities through creation of new purchasing pool arrangements / insurance exchanges (i.e., new large group options)
- 4. Provide direct subsidies to employers and individuals (premium assistance programs; one-third share arrangements employer, employee, gov't)
- 5. Create lower cost (limited) benefit options (preventive only; catastrophic only; all basics except inpatient hospital; "proven" evidence-based coverage only)
- 6. Provide tax incentives for employers to provide and individuals to purchase coverage (e.g., refundable tax credits; credits against state B&O tax)
- 7. Reduce carriers' financial risk / administrative burden (e.g., conventional reinsurance as market stabilization approach; corridor stop-loss a type of subsidy system; risk-sharing redistribution approach)
- 8. Implement individual and small group market reforms (e.g., combine the two)
- 9. Provide direct service support (e.g., community clinic expansions; safety net provider financial support)
- 10. Mandates: Individual and/or employer mandates for coverage (e.g., pay or play) or business-partner mandates (e.g., mandate coverage by those who do business with the state).
- 11. single-payer (e.g., with single financing source gov't; with multiple financing sources employers, individuals, gov't) (with public or private or public/private delivery system)
- 12. Consumer-directed options involving MSAs, HRAs, etc. (usually coupled with catastrophic coverage)

## **COMMON REFORM IDEAS (sans mandates & single-payer)**



<sup>&</sup>lt;sup>1</sup> High level, for illustration (many variations on these themes)

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